

Name: \_\_\_\_\_

## *Getting to Know You...*

In my spare time I like to... (Hobbies, interests, etc.)

My favourite school subjects are...

I like to learn by: (check all that apply)

- |  |   |
|--|---|
| <input type="checkbox"/> Watching videos/documentaries | <input type="checkbox"/> Creating things (projects) |
| <input type="checkbox"/> Reading                       | <input type="checkbox"/> PowerPoint presentations   |
| <input type="checkbox"/> Visuals (photos, etc)         | <input type="checkbox"/> Hands-on activities        |
| <input type="checkbox"/> Taking notes                  | <input type="checkbox"/> Real world examples        |
| <input type="checkbox"/> Simulations/role plays        | <input type="checkbox"/> Discussions                |
| <input type="checkbox"/> Stories                       | <input type="checkbox"/> Other: _____               |

Some things that are important to me are...

My favourite types of music (or specific bands/musicians) are...

Some other things you should know about me are...